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## UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No	555255012568	_
First Inventor	COSKUN	
		7

IRA	MOMITTAL	Title APPARATUS AND METHOD OF WIRELESS						
(Only for new nonprovision	nal applications under 37 CFR 1.53(b))	Express Mail Label No. EV 243780539 US						
t .	ATION ELEMENTS	ADDRESS TO: Bo	sistant Commissioner for Patents ox Patent Application ashington, DC 20231					
Fee Transmittal F (Submit an original and or	[Total Pages 29]  Int set forth below)  Int of the invention on the toron of the program listing appendix in the Invention on of the Drawings (if filed) inpition  Interpolation of the Drawings (if filed) inpition  Interpolation of the Drawings (if filed) inpition	7. CD-ROM or CD-R Computer Program 8. Nucleotide and/or Amino (if applicable, all necessa a. Computer Reada b. Specification Sequence i. CD-ROM ii. paper c. Statements veriff  ACCOMPANYING 9. Assignment Paper 10. (when there is an	in duplicate, large table or in (Appendix) Acid Sequence Submission (IV) Able Form (CRF) See Listing on: Or CD-R (2 copies); or  Sying identity of above copies SEAPPLICATION PARTS OF (cover sheet & document(s)) Statement Power of Attorney On Document (if applicable) Osure Copies of IDS					
b. Copy from a for continual continu	cuted (original or copy) a prior application (37 CFR 1.63 (d)) ation/divisional with Box 18 completed) FION OF INVENTOR(S) atement attached deleting inventor(s) the prior application, see 37 CFR a Sheet. See 37 CFR 1.76	13.  Preliminary Amendment  14.  (Should be specifically itemized)  15.  (Certified Copy of Priority Document(s) (if foreign priority is claimed)  16.  Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.  17.  (Other: Claiming USSN 60/411744 filed 09/19/2002						
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:  Continuation Divisional Continuation-in-part (CIP) Of prior application No.:  Prior application information: Examiner: For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.								
	19. CORRESPOND	ENCE ADDRESS	<del> </del>					
Customer Number or Bar Code Label (Insert Customer No. or Attach ber code label fiere) or Correspondence address below								
Name	David B. Cochran, Esq.							
	JONES DAY							
Address	North Point, 901 Lakeside Ave							
City	Cleveland	State Ohio	Zip Code 44114					
Country	USA Tel	lephone (216) 586-3939	Fax (216) 579-0212					
Name (Print/Type)	David B. Cochran, Esq.	Registration No. (Attorne	ey/Agent) 39,142					
Signature	David Cocks	MI	Date 9/19/03					
<u> </u>	I was all							

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PTO/SB/17 (01-03)
Approved for use through 04/30/2003. OMB 0651-0032
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FEE TRANSMITTAI		Complete				te if Known			
ILLINANSMITTA	Application Number				er		<del></del>		
for FY 2003			Filing Date 09/19/		9/2003	2003			
Effective 01/01/2003. Patent fees are subject to annual revision.		First Named Inventor COSK			KUN et al.				
		Exam	iner N	ame					
Applicant claims small entity status. See 37 CFR 1.27		Art U	nit						
TOTAL AMOUNT OF PAYMENT (\$) 1,086.00		Attorney Docket No. 55525		55012568					
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)							
Check Credit card Money Other None		3. ADDITIONAL FEES Large Entity   Small Entity							
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Deposit Account 501432 (555255012568)		e (\$)	Code		Fe	e Description	1	Fee Paid	
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Account JONES DAY	1052	50	2052		Surcharge - cover sheet	late provisional fi	ling fee or		
Name The Commissioner is authorized to: (check all that apply)		130	1053		Non-English	-	, , ,		
Charge fee(s) indicated below Credit any overpayments		2,520	1812	•	-	equest for ex part			
Charge any additional fee(s) during the pendency of this application	1804	920*	1804		Requesting p Examiner ac	oublication of SIR tion	prior to		
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		1,840*	1805	1,840*	Requesting Examiner ac	publication of SIF	R after		
FEE CALCULATION		110	2251			r reply within firs		}	
1. BASIC FILING FEE	1252		2252	205	Extension for	or reply within sec	cond month		
Large Entity Small Entity	1253		2253		Extension fo	or reply within thir	d month		
Fee Fee Fee Fee <u>Fee Description</u> Fee Paid Code (\$) Code (\$)	1254	1,450	2254	725		or reply within fou			
1001 750 2001 375 Utility filing fee 750.00	1255	1,970	2255	985	Extension fo	or reply within fifth	n month		
1002 330 2002 165 Design filing fee	1401	320	2401	160	Notice of Ap	peal			
1003 520 2003 260 Plant filing fee	1402		2402		-	f in support of an	appeal	·	
1004 750 2004 375 Reissue filing fee	1403	280	2403	140	Request for	oral hearing			
1005 160 2005 80 Provisional filing fee SUBTOTAL (1) (\$) 750.00		1,510	1451	1,510	Petition to in	stitute a public u	se proceeding		
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2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1,300	2453			evive - unintention	nal		
Fee from		1,300	2501		•	fee (or reissue)			
Extra Claims below Fee Paid  Total Claims 34 -20** = 14 x 18.00 = 252.00	1502		2502		Design issue				
Independent 4 2** - 1 × 84.00 - 84.00	1503 1460		2503		Plant issue				
Claims -3 - 1 - 1 -4 -4 -4 -4 -4 -4 -4 -4 -4 -4 -4 -4 -4			1460			the Commissione		L]	
Large Entity   Small Entity	1807		1807		•	fee under 37 CFf	` ''		
Fee Fee Fee <u>Fee Description</u>	1806		1806			of Information Di ach patent assigr		├ <del>─</del> ─┤[	
Code (\$)   Code (\$) 1202 18   2202 9 Claims in excess of 20	8021	40	8021	40	property (tim	nes number of pro	operties)		
1201 84 2201 42 Independent claims in excess of 3	1809	750	2809	375	Filing a subr (37 CFR 1.1	nission after final 29(a))	I rejection		
1203 280 2203 140 Multiple dependent claim, if not paid	1810	750	2810	375		ditional invention 37 CFR 1.129(b))			
1204 84 2204 42 ** Reissue independent claims over original patent		1 750	2801	375		r Continued Exam			
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent		900	1802	900	Request fo of a design	r expedited exam application	nination		
SUBTOTAL (2) (\$) 336.00	Othe	r fee (sp	ecify) _						
**or number previously paid, if greater; For Reissues, see above	*Red	duced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0.00							
SUBMITTED BY (Complete (if applicable)									
Name (Print/Type) David B. Cochran, Esq.	T	Registra (Attornev/		39.	142	Telephone (	216) 586-3939		
Signature Drewel Coches	<del>_</del> _	IAUUITIEV/	AUEIII)			Date	9/19/0.	3	

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